

**IN THE OFFICE OF THE STATE ENGINEER OF NEVADA
REQUEST FOR A WAIVER FOR TEMPORARY USE OF GROUND WATER
FOR MINERALS EXPLORATION**

The applicant and or person or company responsible for drilling and plugging the temporary well

Street and No. Or P.O. Box No. City or Town State and Zip Code No.

Telephone number of responsible party _____

Estimated starting and completion dates: _____ Start Date _____ Completion Date

Location of the temporary water source well by public survey:

_____ $\frac{1}{4}$ _____ $\frac{1}{4}$ Section _____ T. _____ R. _____ M.D.B. & M.

Latitude and Longitude _____

Or

Easting and Northing _____

Street Address (if any): _____

County Assessor Parcel Number (APN): _____ - _____ - _____

Location of mineral exploration plan of operations and description of how water is to be used:

Estimated amount of water to be used (gallons per day x number of days): _____

Is this well a new well or an existing well? _____

If this is an existing well, please submit a copy of the agreement between you and the owner.

The water well shall be drilled by a person licensed by the State Engineer of Nevada. An Affidavit of Intent to Abandon shall be filed with this waiver request. If no permit to appropriate water is in place for this temporary water source well at the end of the exploration-drilling program, this well shall be plugged and abandoned in accordance with NAC 534.420

By: _____
Signature, applicant or agent

TELEPHONE NUMBER

Street and No. Or P.O Box No.

City, State, Zip Code